PORTAGE COUNTY HEALTH CARE CTR

825 WHITING AVE

STEVENS POINT 54481 Phone: (715) 346-1374	1	Ownership:	County
Operated from 1/1 To 12/31 Days of Operation	366	Highest Level License:	Skilled
Operate in Conjunction with Hospital?	No	Operate in Conjunction with CBRF?	No
Number of Beds Set Up and Staffed (12/31/04):	124	Title 18 (Medicare) Certified?	Yes
Total Licensed Bed Capacity (12/31/04):	132	Title 19 (Medicaid) Certified?	Yes
Number of Residents on 12/31/04:	96	Average Daily Census:	103

Services Provided to Non-Residents		Age, Gender, and Primary Di	agnosis	of Residents (	12/31/04)	Length of Stay (12/31/04)	%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	35.4
Supp. Home Care-Personal Care	No	Danilan and Dischilled				1 - 4 Years	40.6
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	3.1	More Than 4 Years	24.0
Day Services	No	Mental Illness (Org./Psy)	29.2	65 - 74	12.5		
Respite Care	No	Mental Illness (Other)	5.2	75 - 84	33.3		100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	45.8	*********	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	5.2	Full-Time Equivalent	
Congregate Meals	Yes	Cancer	4.2			Nursing Staff per 100 Res	idents
Home Delivered Meals	Yes	Fractures	2.1	İ	100.0	(12/31/04)	
Other Meals	No	Cardiovascular	22.9	65 & Over	96.9		
Transportation	No	Cerebrovascular	13.5			RNs	11.5
Referral Service	No	Diabetes	6.3	Gender	%	LPNs	8.2
Other Services	No	Respiratory	6.3			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	10.4	Male	30.2	Aides, & Orderlies	58.6
Mentally Ill	No			Female	69.8		
Provide Day Programming for			100.0				
Developmentally Disabled	No				100.0		
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## Method of Reimbursement

		Medicare			edicaid itle 19			Other			Private Pay			Family Care			anaged Care	l 		
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	Of
Int. Skilled Care	0	0.0	0	1	2.1	137	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.0
Skilled Care	14	100.0	329	47	97.9	117	0	0.0	0	13	100.0	164	21	100.0	117	0	0.0	0	95	99.0
Intermediate				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care							0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependen	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	14	100.0		48	100.0		0	0.0		13	100.0		21	100.0		0	0.0		96	100.0

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PORTAGE COUNTY HEALTH CARE CTR

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Admissions, Discharges, and		Percent Distribution	of Residents'	Condit	ions, Services,	and Activities as of 12	2/31/04
Deaths During Reporting Period							
					% Needing		Total
Percent Admissions from:		Activities of	%	As	sistance of	% Totally	Number of
Private Home/No Home Health	4.1	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	0.5	Bathing	3.1		60.4	36.5	96
Other Nursing Homes	2.7	Dressing	7.3		61.5	31.3	96
Acute Care Hospitals	91.9	Transferring	17.7		47.9	34.4	96
Psych. HospMR/DD Facilities	0.0	Toilet Use	14.6		49.0	36.5	96
Rehabilitation Hospitals	0.5	Eating	56.3		28.1	15.6	96
Other Locations	0.5	*******	******	*****	******	********	*********
Total Number of Admissions	222	Continence		%	Special Treatm	nents	8
Percent Discharges To:		Indwelling Or Extern	al Catheter	4.2	Receiving Re	spiratory Care	21.9
Private Home/No Home Health	36.0	Occ/Freq. Incontinen		63.5	Receiving Tr	acheostomy Care	0.0
Private Home/With Home Health	21.2	Occ/Freq. Incontinen	t of Bowel	61.5	Receiving Su	ıctioning	0.0
Other Nursing Homes	0.4				Receiving Os	stomy Care	6.3
Acute Care Hospitals	11.9	Mobility			Receiving Tu	be Feeding	3.1
Psych. HospMR/DD Facilities	0.0	Physically Restraine	d	3.1	Receiving Me	chanically Altered Diet	s 52.1
Rehabilitation Hospitals	0.0						
Other Locations	8.9	Skin Care			Other Resident	Characteristics	
Deaths	21.6	With Pressure Sores		2.1	Have Advance	e Directives	78.1
Total Number of Discharges		With Rashes		3.1	Medications		
(Including Deaths)	236				Receiving Ps	sychoactive Drugs	65.6

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

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		Own	ership:	Bed	Size:	Lic	ensure:		
	This	Gov	ernment	100	-199	Ski	lled	Al	1
	Facility	Peer	Group	Peer	Group	Peer	Group	Faci	lities
	%	િ	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	77.2	87.2	0.89	86.9	0.89	87.7	0.88	88.8	0.87
Current Residents from In-County	88.5	54.3	1.63	80.4	1.10	70.1	1.26	77.4	1.14
Admissions from In-County, Still Residing	14.4	25.2	0.57	23.2	0.62	21.3	0.68	19.4	0.74
Admissions/Average Daily Census	215.5	55.2	3.91	122.8	1.76	116.7	1.85	146.5	1.47
Discharges/Average Daily Census	229.1	59.6	3.85	125.2	1.83	117.9	1.94	148.0	1.55
Discharges To Private Residence/Average Daily Census	131.1	21.2	6.19	54.7	2.40	49.0	2.68	66.9	1.96
Residents Receiving Skilled Care	100	87.1	1.15	96.9	1.03	93.5	1.07	89.9	1.11
Residents Aged 65 and Older	96.9	87.7	1.10	92.2	1.05	92.7	1.04	87.9	1.10
Title 19 (Medicaid) Funded Residents	50.0	77.9	0.64	67.9	0.74	68.9	0.73	66.1	0.76
Private Pay Funded Residents	13.5	16.8	0.81	18.8	0.72	19.5	0.69	20.6	0.66
Developmentally Disabled Residents	0.0	0.5	0.00	0.6	0.00	0.5	0.00	6.0	0.00
Mentally Ill Residents	34.4	46.5	0.74	37.7	0.91	36.0	0.96	33.6	1.02
General Medical Service Residents	10.4	21.0	0.50	25.4	0.41	25.3	0.41	21.1	0.49
Impaired ADL (Mean)	55.8	44.6	1.25	49.7	1.12	48.1	1.16	49.4	1.13
Psychological Problems	65.6	66.5	0.99	62.2	1.05	61.7	1.06	57.7	1.14
Nursing Care Required (Mean)	11.1	8.7	1.27	7.5	1.48	7.2	1.53	7.4	1.49